

region of the incisura ischiadica and from there be allowed to "wander" in the pelvis anteriorly to the region of the foramen obturatum. On account of this difficulty this particular blade should always be introduced first, although it may thereby become necessary to cross the handles of the forceps in order to lock it.

When there is high and transverse head presentation, the forceps should be applied neither in the adaptation optimum of the head nor in that of the pelvis. An attempt should be made to turn the instrument to the best possible account by introducing it across the face and occiput more deeply into the pelvis.

NOTE II.—Further auxiliary movements to be imparted to the fetus in difficult cases of version. In the case of a practically inaccessible foot, owing to tension of the uterine wall: extraction of the foot by "climbing movements in situ" by means of the inner hand (the advance of which is impeded) via thigh, knee, leg to the ankle joint. (Climbing movements can be successfully executed only in this way, that the extremity on which the climbing is to be done, is supported by the fingers on several sides and thus being "in splints" is protected from breaking).

In cases of difficult accessibility of the uterine cavity the outer hand displacing the advancing parts of the fetus along the fingers of the invading hand until the latter can seize a foot and assist in pushing the foot through a uterine outlet which would admit of the simultaneous passage of the foot plus two fingers. Turning the mother over to the side where the feet lie (taking care that the hand in the uterus is kept at rest) facilitates access to the feet and allows them to meet the searching hand half way.

NOTE III.—If both arms are turned upward toward the face, always liberate first the one lying toward the sacrum in the "liberation optimum," that is, simultaneously toward the face and sacrum. An arm bent up toward the symphysis and at the same time toward the face is only then liberated, if such liberation is presumably easy or if the other arm is in a still worse position, namely, toward the nape of the neck and the